

**Nonimmigrant Petition based  
on Blanket L Petition****INSTRUCTIONS****Purpose of This Form.**

This form is for an employer to classify employees as L-1 nonimmigrant intracompany transferees under a blanket L petition approval.

**Who May File.**

An employer who has already obtained approval of a blanket L-1 petition may file this form to classify employees outside the U.S. as executives, managers or specialized knowledge professionals. If the employee is in the U.S. and you are requesting a change of status or extension of stay for that employee, use Form I-129, Petition for a Nonimmigrant Worker.

**General Filing Instructions.**

Please answer all questions by typing or clearly printing in black ink. Indicate that an item is not applicable with "N/A." If the answer is "none," write "none." If you need extra space to answer any item, attach a sheet of paper with your name and alien registration number (A#), if any, and indicate the number of the item to which the answer refers. You must file your petition with the required **Initial Evidence**. Your petition must be properly signed and filed with the correct fee. Retain a copy of the form and supporting documents for your records.

**Translations.** Any foreign language document must be accompanied by a full English translation that the translator has certified as complete and correct, and by the translator's certification that he or she is competent to translate the foreign language into English.

**Copies.** If these instructions state that a copy of a document may be filed with this petition, and you choose to send us the original, we may keep that original for our records.

**Initial Evidence.**

You must file your petition with:

- a copy of the approval notice for the blanket petition;
- a letter from the alien's foreign qualifying employer detailing his/her dates of employment, job duties, qualifications and salary, demonstrating that the alien worked for the employer for at least one continuous year in the three-year period preceeding the filing of the petition in an executive, managerial or specialized knowledge professional capacity; and
- if the alien is a specialized knowledge professional, a copy of a U.S. degree, a foreign degree equivalent to a U.S. degree, or evidence establishing that the combination of the beneficiary's education and experience is the equivalent of a U.S. degree.

**Where to File.**

If the alien requires a visa, he or she should present the completed petition to the U.S. Consular Officer. If the alien is not required to obtain a visa, he or she should file this petition at the INS Service Center which approved the blanket petition.

**Fee.**

There is no fee for this petition.

**Processing Information.**

**Acceptance.** Any petition that is not signed, or is not accompanied by the correct fee, will be rejected with a notice that the petition is deficient. You may correct the deficiency and resubmit the petition. However, a petition is not considered properly filed until accepted by INS.

**Initial processing.** Once a petition has been accepted, it will be checked for completeness, including submission of the required initial evidence. If you do not completely fill out the form, or file it without required initial evidence, you will not establish a basis for eligibility and we may deny your petition.

**Requests for more information or interview.** We may request more information or evidence, or we may request that you appear at an INS office for an interview. We may also request that you submit the originals of any copy. We will return these originals when they are no longer required.

**Decision.** You will be notified in writing of the decision on your petition. If you filed the petition at an INS Service Center and it is approved, the approval notice will be sent to you so you can send it to the beneficiary to present at a port of entry when he or she enters the U.S.

**Penalties.**

If you knowingly and willfully falsify or conceal a material fact or submit a false document with this request, we will deny the benefit you are filing for, and may deny any other immigration benefit. In addition, you will face severe penalties provided by law, and may be subject to criminal prosecution.

**Privacy Act Notice.**

We ask for the information on this form, and associated evidence, to determine if you have established eligibility for the immigration benefit you are filing for. Our legal right to ask for this information is in 8 USC 1154. We may provide this information to other government agencies. Failure to provide this information, and any requested evidence, may delay a final decision or result in denial of your request.

**Paperwork Reduction Act Notice.**

A person is not required to respond to a collection of information unless it displays a currently valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood and which impose the least possible burden on you to provide us with information. Often this is difficult because some immigration laws are very complex. The estimated average time to complete and file this application is as follows: (1) 10 minutes to learn about the law and form; (2) 10 minutes to complete the form; and (3) 15 minutes to assemble and file the petition; for a total estimated average of 35 minutes per petition. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you can write to the Immigration and Naturalization Service, HQPDI, 425 I Street, N.W., Room 4034, Washington, DC 20536; OMB No. 1115-0128. **DO NOT MAIL YOUR COMPLETED APPLICATION TO THIS ADDRESS.**

U.S. Department at Justice  
Immigration and Naturalization Service

# Nonimmigrant Petition based on Blanket L Petition

**START HERE - Please Type or Print**

## Part 1. Information about employer.

Sponsoring Company or  
Organization's Name

Address - ATTN:

Street Number  
and Name

Room  
#

City  
or Town

State or  
Province

Country

Zip/Postal  
Code

## Part 2. Information about employment.

This alien will be a:

- a. ☐ manager/executive  
b. ☐ specialized knowledge professional

Blanket petition approval number

## Part 3. Information about employee.

Family  
Name

Given  
Name

Middle  
Initial

### Foreign Address

Street Number and Name

Apt.  
#

City

State or  
Province

Country

Zip/Postal  
Code

Date of Birth  
(Month/Day/Year)

Country  
of Birth

## Part 4. Additional information about the employment.

### Address

Street Number  
and Name

Room  
#

City  
or Town

State  
Province

Country

Zip/Postal  
Code

Dates of intended employment From  
(Month/Day/Year)

To

Weekly  
Wage

Hours per  
Week

Title and detailed description of duties to be performed.

## FOR INS USE ONLY

Returned

Receipt

Resubmitted

Reloc Sent

Reloc Rec'd

☐ Petitioner  
Interviewed  
☐ Beneficiary  
Interviewed

Approved as:

☐ manager/executive  
☐ specialized knowledge

Validity dates

From: \_\_\_\_\_

To: \_\_\_\_\_

Denied (give reason)

### Action Block

To Be Completed by  
Attorney or Representative, if any

☐ Fill in box if G-28 is attached to  
represent the petitioner

VOLAG#

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**Part 4. (Continued).**

Give the alien's dates of prior periods of stay in the U.S. in a work authorized capacity and the type of visa.

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Give the alien's dates of employment and job duties for the immediate prior three years.

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Summarize the alien's education and other work experience.

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**Part 5. Signature.** Read the information on penalties in the instructions before completing this section.

I certify, under penalty of perjury under the laws of the United States of America, that this petition and the evidence submitted with it is all true and correct. I am filing this on behalf of an organization, I certify that I am empowered to do so by that organization. If this petition is to extend a prior petition, I certify that the proposed employment is under the same terms and conditions as in the prior approved petition. I authorize the release of any information from my records, or from the petitioning organization's records, which the Immigration and Naturalization Service needs to determine eligibility for the benefit being sought.

*Signature*

Print Name

Date

Please Note: If you do not completely fill out this form, or fail to submit required documents listed in the instructions, then the person(s) filed for cannot be found eligible for the requested benefit, and your petition may be denied.

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**Part 6. Signature of person preparing form, if other than above.**

I declare that I prepared this application at the request of the above person and it is based on all information of which I have knowledge.

*Signature*

Print Name

Date

Firm Name  
and Address